



**Robert E. Bush
Naval Hospital**

Did you know?...

You have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

- * Through the ICE website.

- * Through the Naval Hospital Customer Comment Cards.

- * The Hospital's Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the hospital's clinics.

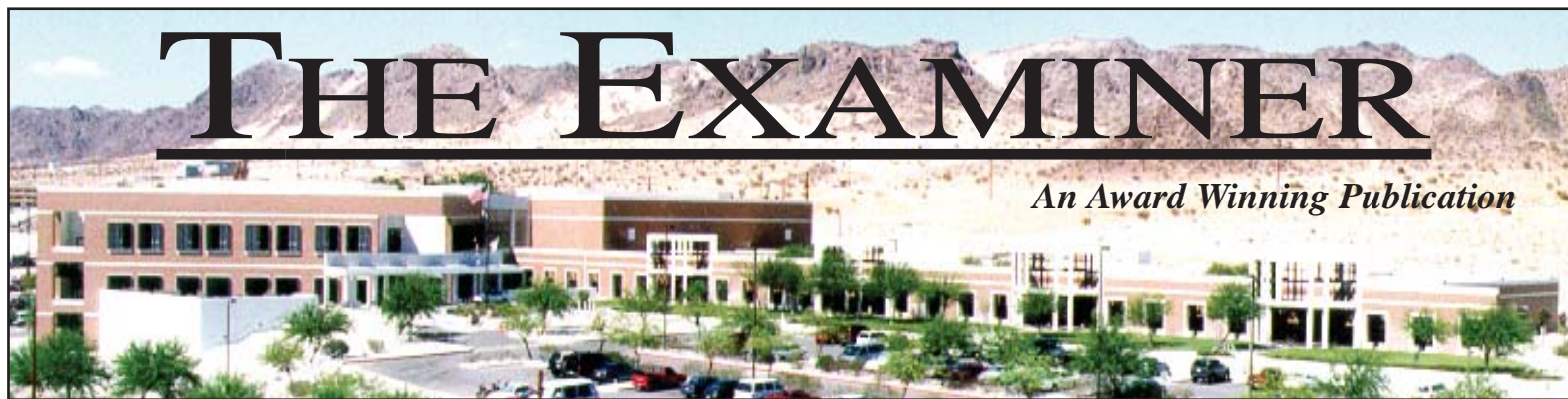
Or Directly to the Joint Commission via:

E-mail at complaint@jointcomission.org

Fax:
Office of Quality Monitoring
630-792-5636

Mail:
Office of Quality Monitoring
The Joint Commission
Oak Renaissance Boulevard
Oakbrook Terrace, IL 60181

Commanding Officer
Naval Hospital Public Affairs Office
Box 788250 MAGTFTC
Twentynine Palms, CA 92278-8250



<http://www.med.navy.mil/sites/nhttp/pages/default.aspx>

Introducing Captain Cynthia Gantt, (NC) Executive Officer

By Dan Barber
Public Affairs Officer
Robert E. Bush Naval Hospital

Captain Cynthia Gantt, is not new to the command... she is a plank owner of the Robert E. Bush Naval Hospital.

To be clear the command was officially established as Naval Hospital Twentynine Palms, in 1988 under the command of then Commander G. Russell Brown. In 1991, newly commissioned Lieutenant Cynthia Gantt became the first Family Nurse Practitioner assigned to the command...it was also her first "job" as she explained, in her civilian lexicon, to then Captain Brown in her first meeting with the CO after checking in. "I was new to the Navy and I tried to explain to Captain Brown that I wasn't sure what to do," said Gantt. "Captain Brown told me, well lieutenant you better learn."

In July 1993 the command moved into the current facility.

It seems that Captain Brown set the tone for Gantt to excel in her chosen profession... to "learn."

Fast forward 21 years and now Captain Cynthia Gantt, NC, USN, FNP-BC, PhD, a recipient of the American Hospital Associations (AHA) "2010 Federal Health Care Executive Award for Excellence" was selected by Rear Admiral Elizabeth Niemyer, Director of the Navy Nurse Corps for the Executive Officer "job" here.

"This is a gift that I never expected to receive. I am so grateful for this opportunity. When Rear Admiral Niemyer called me and said Cynthia, congratulations, you are the next executive officer at Naval Hospital Twentynine Palms. I was thrilled. It was my first choice, and I never expected to get it."

Gantt hails from Temple City, Calif., a suburb of Los Angeles. There she attended Temple City High School and then went on to earn an Associate Degree from Pasadena City College.

She wasn't yet finished with her education, she then earned a Bachelor of Science in Nursing from Sonoma State University, graduating cum laude and was the valedictorian speaker at the commencement. Also at Sonoma State she also later returned and earned a Master's in Science degree as a Nurse Practitioner.

Gantt's father, who still lives in Temple City, was in the U.S. Navy for 3 years and who retired several years ago from the Postal Service was an inspiration to his daughter. "I was inspired by my father's service in the Navy, but when I was in Graduate School at Sonoma, a Navy Nurse Corps recruiter came and offered me a free lunch, which was my introduction to the United States Navy as a possible job option."

"Everyone of my past duty station's have had a memorable experience for me. This command was my first duty station when I was assigned as the first Family Nurse Practitioner... I am a plank owner of this facility," said Gantt. "I met my husband, Lieutenant Robert Gantt, here... so I have many memorable experiences right here," said Gantt.



Patients seen in May -- 12,748

Appointment No Shows in June -- 926

The news for our patients in June show a small up tick in our missed appointments. For May it was 6.6 percent, for June we are up a bit to 6.8 percent. We have to keep the appointments we make, or cancel in enough time for someone else to use the slot... Don't let your neighbors down by denying them access to needed health care.

**To make an appointment call -- 760-830-2752
To cancel an appointment call -- 760-830-2369**

Continued on page 7

New Model of Health Care Delivery and Communications Coming Soon

*By Dan Barber
Public Affairs Officer
Robert E. Bush Naval Hospital*

The Robert E. Bush Naval Hospital is in the process of converting to the Medical Home Port model of health care delivery to enrolled patients.

The Medical Home Port model will allow patients enrolled at Robert E. Bush Naval Hospital, to see the same team of providers each time they call or come in for medical appointments.

The ultimate goal is to see your personal Primary Care Manager (PCM) as often as possible. However, if they are not available, another provider on the same team will see you.

In addition to providers, the team of healthcare professionals

will also be made up of nurses, clerks, and hospital corpsmen that are dedicated to providing their patients with the best possible care. Patients will be able to get to know the rest of the staff as well as they know their provider. According to a recent article in the Los Angeles Times newspaper, Four physician groups... the American Academy of Family Physicians, the American Academy of Pediatrics, the American College of Physicians and the American Osteopathic Assn. , believe this method of patient care, known as patient-centered medical homes will provide patients with more access to primary care and allow longer appointments.

Medical Home Ports add continuity of care for patients even when the active duty provider deploys.

The combination of both civilian and military team members cultivates stability for the teams and patients when military members are transferred or

...Medical Home Ports add continuity of care for patients even when the active duty provider deploys...

deployed.

The hospital's Facilities Management Department is in the process of arranging the

clinics spaces so team members will all be co-located.

In addition to assigning patients to one of three teams here, Naval Hospital Twentynine Palms has established "Naval Hospital 29 Online" which is powered as a secure messaging program by Relay Health... contracted through Navy Medicine. Naval Hospital 29 Online is a secure computer based program which provides a more convenient method of communications with the healthcare teams, allowing patients to securely communicate, via e-mail. Naval Hospital 29 Online will allow patients to request their lab results; request a medication refill; access health care information and allow them to create their own health care record to help manage their own care, all from the comfort of home.

A feature of this new communications concept that should prove very popular, is patients will be able to request appointments through the Naval Hospital 29 Online link on the hospital's web site. The hospital's Information Management team has been working on this project to make it easy for everyone to use in a secure forum to protect patient to provider communications.

According to the Executive Officer of the hospital, Capt. Cynthia Gantt, "I truly believe that the Medical Home Port will improve the health of all our beneficiaries. The changes we are making will help foster the patient-provider partnerships that will increase a person's sense of control over their health care and will lead to patient satisfaction."

Africanized honey bees... How dangerous are they?

*By Martha Hunt, MA CAMF
Health Promotion and Wellness
Robert E. Bush Naval Hospital*

Morengo Basin has a resident population of Africanized Honey Bees (AHB). AHBs are not native to the U.S.; they came from Africa to South America and then crossed over to the US across the Texas border.

Just like regular honey bees that we are used to, they pollinate plants and can only sting once before dying. The problem is that AHBs are very aggressive and will swarm in huge numbers to protect their hives. You cannot tell a regular honey bee from an AHB as they look identical. Therefore it is always best to be careful around all bees and do not anger them or otherwise annoy them so that they sting.

The best safety advice is to avoid an encounter with unfriendly Africanized bees. Remember that AHBs sting to defend their colony, so watch for honey bee swarms and colonies. AHBs don't always live in the typical beehive we are familiar with... rather they sometimes nest in cracks of houses and junk left in your yard. For that reason, be alert for bees coming in and out of an opening such as a crack in a wall, or the hole in a utility box. Also listen for the hum of bees to lead you to where the colony may be nested.

There have been reports of AHBs in the Joshua Tree National Park and the open desert here so be aware of your surroundings and keep an eye out for bees the way you would watch out for snakes and other natural dangers. Don't panic at the sight of a few bees foraging in the flowers. Bees are generally very docile as they go about their normal activities.

Here are some precautions that you can take so that you don't attract AHBs -- or any dangerous creature -- in the first place. Wear light-colored clothing as bees tend to attack dark things. Dark clothing, dark hair, or anything dark in color could provoke the AHB. Also, bees are sensitive to odors, both pleasant and unpleasant. The smell of newly cut grass has been shown to disturb these bees. Also avoid wearing floral or citrus after shaves or perfume.

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Commanding Officer
Captain Ann Bobeck, MSC, USN

Executive Officer
Captain Cynthia Gantt, NC, USN

Command Master Chief
HMCM (SW/FMF) Rodney Ruth, USN

Public Affairs Officer/Editor
Dan Barber

Command Ombudsman
Valatina Ruth
Care Line 830-2716
Cell Phone (760) 910-2050

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How to reach us...
Commanding Officer Naval Hospital
Public Affairs Office
Box 788250 MAGTFTC
Twentynine Palms, CA 92278-8250
Com: (760) 830-2362
DSN: 230-2362
FAX: (760) 830-2385
E-mail: dan.barber@med.navy.mil
Hi-Desert Publishing Company
56445 Twentynine Palms Highway
Yucca Valley, CA 92284
Com: (760) 365-3315
FAX: (760) 365-8686



Convenient Access to Online Accounts with One Password

By Brian P. Smith
TriWest Healthcare Alliance

There is a logon that allows military families access to certain Department of Defense (DoD) benefit websites with one username and password: it's the DS Logon. Having a DoD Self-Service Logon (DS Logon) can mean remembering just one username and password for some DoD and Veterans Affairs (VA) websites.

How to request your single logon:

* Sponsors with a Common Access Card (CAC) or DFAS myPay Login ID may request a DS Logon at myaccess.dmdc.osd.mil/dsaccess.

* Eligible beneficiaries can

request a DS Logon at TRI-CARE Service Centers (TSC).

* Sponsors and family members can also request a DS Logon through the VA eBenefits portal.

It's safe and secure

If the sponsor does not use the CAC or DFAS method to request a DS Logon, beneficiaries must finish a verification process known as in-person proofing to be granted full DS logon access. To help protect your identity, users need full, or Level 2, access to view or change personal information through the websites below. You can complete the verification process at a TSC. National Guard and Reserve members who can't go to a TSC for validation may be eligible to complete a remote proofing process (more information at www.tri-care.mil/reserve).

care.mil/reserve).

After in-person (or remote) proofing, your DS Logon can be used to access these DoD and VA sites:

* Beneficiary Web Enrollment (www.dmdc.osd.mil/appj/bwe): Manage TRICARE Prime enrollments and update contact information.

* Reserve Component Purchased TRICARE Application (www.dmdc.osd.mil/appj/reservetricare): Purchase TRICARE Reserve Select and TRICARE Retired Reserve coverage.

* TRICARE Online (www.tricareonline.com): Set appointments and refill prescriptions at certain military treatment facility locations.

* myDoDbenefits (mydodbenefits.dmdc.osd.mil): Access and update information that goes

directly into the Defense Enrollment Eligibility Reporting System (DEERS).

* VA eBenefits (www.ebenefits.va.gov): Apply for Veterans Affairs (VA) benefits, download your Certificate of Release or Discharge from Active Duty (DD Form 214) and view benefits status.

* DS Logon Self-Service (myaccess.dmdc.osd.mil/dsaccess): Activate and manage your DS Logon account.

What kind of identification do I need for in-person proofing?

Beneficiaries need two current

forms of approved ID; at least one must be a government-issued photo ID. DMDC's list of approved IDs: www.dmdc.osd.mil/appj/dsaccess/pub/FAQ.do.

What about my secure www.triwest.com account?

Your triwest.com account does not use the DS Logon option. A triwest.com username and password are required to manage your health care through a triwest.com account. Go to www.triwest.com/Register to learn more.

Got the New Baby Blues?

By Martha Hunt, MA Health Promotions Coordinator
Robert E. Bush Naval Hospital

Postpartum Depression is used to describe a range of physical and emotional changes that new moms experience around the time of the birth of their babies. Symptoms of postpartum depression or "the baby blues" can range from mild to severe. Sometimes new moms need medications to help with these symptoms, while other moms may only need to talk to someone they trust so that they can get help working through their symptoms.

Postpartum Depression symptoms can include: persistent sad or empty moods; sudden mood swings; loss of interest in usual activities; restlessness; irritability; excessive crying; feelings of guilt for no reason; feelings of worthlessness, helplessness, or hopelessness; or fear of hurting the baby or yourself.

Postpartum Depression symptoms can also include: sleeping too much or too little; eating too much or too little; feeling fatigued and drained; thoughts of death or suicide; difficulty concentrating or making decisions; excessive forgetfulness; or vague physical complaints.

The Baby Blues are felt by as many as 75 percent of all women who have either recently given birth or recently experienced the loss of a pregnancy. Symptoms of the baby blues are usually felt 3-4 days after delivery. However, baby blues may also be felt while you are still pregnant. If Postpartum Depression is left untreated, symptoms may worsen and may last for up to a year after delivery.

It's not known exactly what causes the Baby Blues. They may be caused by changes in hormones in your body, stress over being pregnant or the delivery, feeling isolated from family and friends, and feeling simply overwhelmed by the responsibility of being a new parent.

A new mom can experience Baby Blues after the birth of any child, not just the first one. Also, she may feel them for one pregnancy, but not another. There is no way to predict which pregnancy will result in postpartum depression. Any woman is at risk of postpartum depression regardless of the number of children she has had or her age.

Postpartum Depression is more likely to occur if a woman has had any of the following: previ-

ous postpartum depression; depression not related to pregnancy; severe premenstrual syndrome (PMS); a non-supportive partner; or stress related to family, marriage, occupation, housing or other events in her life.

Self care for new moms should include getting enough rest! Take time for yourself and try to nap when the baby naps so you do not become exhausted. Ask for help when you need it. Ask your partner for help with chores and get emotional support from your partner, family and friends. Make an effort to get out of the house every day, even if it's only for a short walk in your neighborhood. Make time for just you and your partner. Ask your primary care provider for help. Join a new parent support group so you can meet other new moms who are going through the same experiences as you.

Remember that you don't have to suffer with Post Partum Depression. There are people and groups in the community that can help. You can call either the Perinatal Case Management Program at 830-2822, the Behavioral Health Department at 830-2724 if you are active duty or Military One Source at 1-800-342-9647 for more information.

Six Tips to Save a Child from Drowning

By Shari Lopatin
TriWest Healthcare Alliance

Three children die every day from drowning.

It's the leading cause of death from an injury for children ages 1-4 years old, according to the Centers for Disease Control and Prevention (CDC). Mid-summer is prime time for water fun, but it can also be deadly, if parents aren't careful.

The Red Cross Summer Water Safety Guide states more than 90 percent of families with young children will spend time in the water this summer. And almost half of them plan to swim in places with no life-guard.

What does this mean?

You need to take responsibility for your children's safety around water. Here are six tips from the Red Cross and the CDC to keep your children safe:

1. Learn CPR. Seconds count if your child falls into the water. You could be the life-saving support until paramedics arrive. Contact your local Red Cross chapter or your local fire department to learn when CPR classes are available.
2. Supervise your children constantly around water. Never leave the supervision to an older child, and avoid distractions yourself when watching your kids. This includes around bathtubs, swimming pools and natural bodies of water...such as the ocean or a lake.
3. Secure pools with proper barriers. Install a four-sided fence

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Super Stars...



HM1 Eduardo Pamatz, Radiology, takes the oath of reenlistment recently for a period of six years.



Lieutenant Rebecca Ensley, a physician in the Internal Medicine Dept., receives a Navy and Marine Corps Achievement Medal for her work while assigned to the Robert E. Bush Naval Hospital.

HM2 Mary Wagner, Radiology, takes the oath of reenlistment for a period of three years. The reenlisting officer for both Pamatz and Wagner, was the Radiologist for the Naval Hospital, Lieutenant Commander Christopher Delbridge (not shown in photos).



Beneficiaries Can Battle Blemishes with TRICARE

By Kristin Shives
TRICARE Management Activity

Acne is a common problem among people of all ages, but some face chronic, severe breakouts that may require medical treatment. Beneficiaries can rest assured knowing TRICARE covers treatment for acne.

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) estimates 80 percent of all people between the ages of 11 and 30 have acne outbreaks at some point. It's unclear why certain people get acne, but according to NIAMS there are two important factors: an increase in hormones called androgens and heredity.

Androgens increase in both boys and girls during puberty, causing oil glands to enlarge and produce more oil. Hormonal changes like pregnancy and starting or stopping birth control pills can also lead to acne. Although going through puberty and heredity can't be changed, there are effective preventive actions and treatments available.

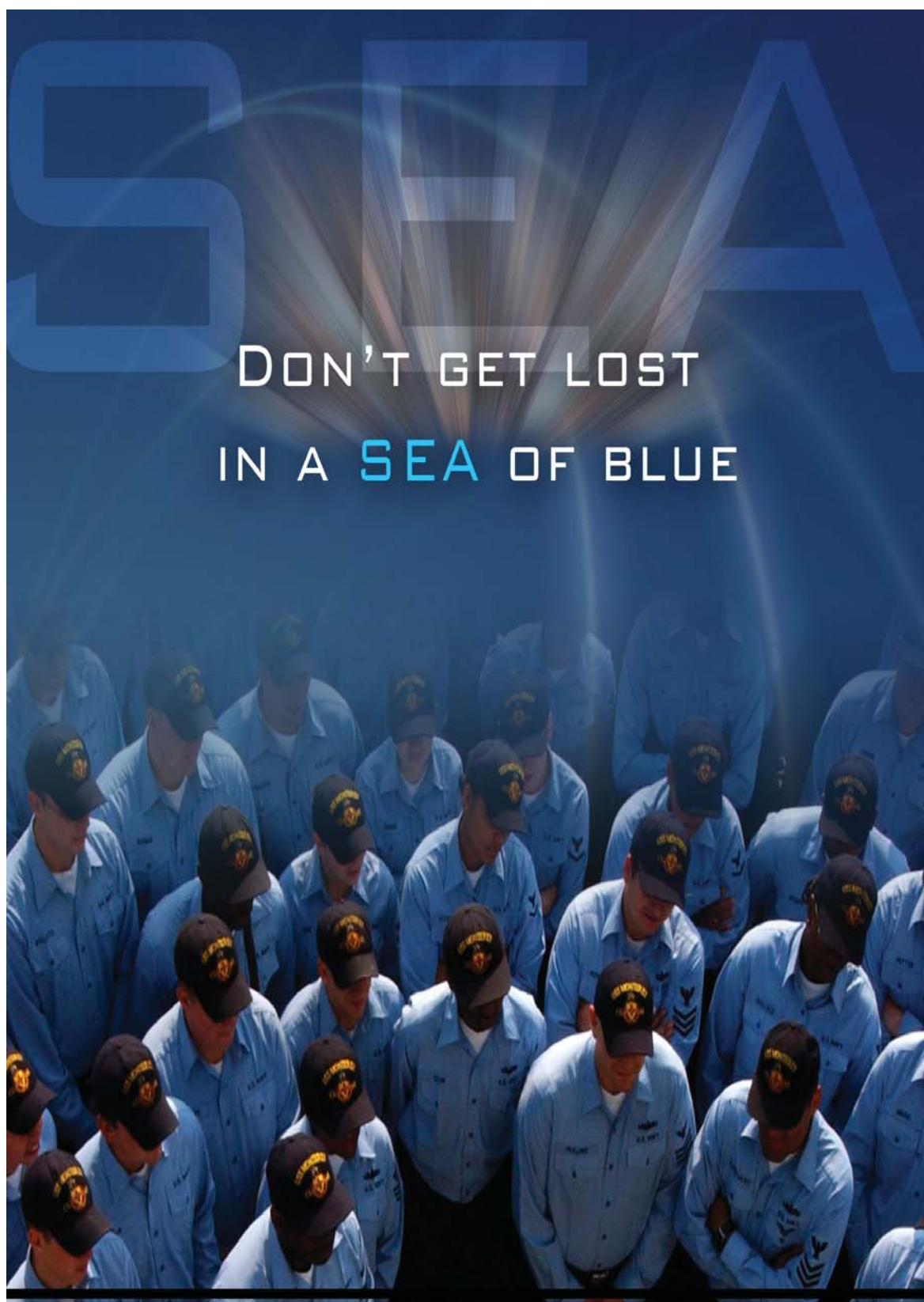
The Centers for Disease Control and Prevention offers a few ways to help reduce breakouts:

- * Wash the face morning and evening with warm water and mild cleanser
- * Keep hands away from the face
- * Don't pick or try to pop pimples...it can lead to scarring
- * Wash hair regularly to help minimize oils from hair touching the face

Acne or pimples occur when the skin makes excess oil and dead skin cells get trapped in the pores of oil glands. When these pores get clogged, a pimple forms. Bacteria can get trapped in the clogged pores and cause the pore to become inflamed and appear red and swollen. The face, neck, back, chest and shoulders are common places to find pimples.

TRICARE covers medically appropriate treatment for acne. Acne can initially be treated with over-the-counter medications, creams, washes or soaps. These over-the-counter products are not covered by TRICARE. Depending on response to treatment or severity of acne, a provider may issue a referral to a dermatologist.

Beneficiaries who are concerned about their skin can get medically appropriate treatment for acne with TRICARE Prime, Standard and Extra. For TRICARE Prime, beneficiaries must first contact their primary care manager for a referral. For TRICARE Standard and Extra, beneficiaries may visit any TRICARE-authorized provider for care. Referrals are not required, but some services may need authorization.



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COMMAND



TRICARE Tracks Progress of Pregnancy

By Kristin Shives
TRICARE Management Activity

Ultrasound images are an exciting part of an expectant mother's pregnancy and are often used to assess the progression of the pregnancy.

TRICARE covers medically necessary ultrasounds for expectant moms, but does not cover 'routine' ultrasounds. So, what's the difference?

A medically necessary ultrasound is one doctors perform when they have a concern about the progression of a pregnancy. Doctors often perform medically necessary maternity ultrasounds at different times during pregnancy. TRICARE covers the following reasons:

- * Confirming gestational age when date of conception is uncertain
- * Evaluating a fetus' growth or well being
- * Evaluating a fetus or uterus for abnormalities

malities

- * Diagnosing and monitoring multiples (twins or greater)

Doctors may offer expectant mothers 'routine' ultrasounds 16 to 20 weeks into their pregnancy. An ultrasound performed without medical necessity is not covered by TRICARE. It's important for expectant parents to remember ultrasounds aren't to reveal a baby's gender. Instead, the procedure is done to take an early look at the fetus to make sure it's developing properly.

Ultrasounds are commonly given before week 12 based on clinical circumstances where the mother is having bleeding, pain or is at risk for an ectopic pregnancy (an ectopic pregnancy is when a fertilized egg has implanted outside the uterus). Additional scans can be administered for medical problems such as high blood pressure, diabetes, obesity or when a physical exam suggests cause for concern.

Mothers-to-be should seek appropriate pre-

natal care as soon as their pregnancy is confirmed. Prenatal care helps ensure the health of the mother and baby. TRICARE Prime covers all necessary maternity care, from the first obstetric visit through six weeks after a baby is born. TRICARE Standard and Extra beneficiaries pay their normal deductibles and cost shares for office visits and inpatient maternity care.

Beneficiaries are responsible for payment when ultrasounds are performed without a valid medical reason i.e., just to find out the sex of the baby.

For more information on updates on maternity ultrasound coverage, prenatal care and maternity services, beneficiaries can go to the 'Life Events' tab of www.tricare.mil/mybenefit and select 'Having a Baby or Adopting' or contact their regional contractor. The regional contractors' phone numbers and Web sites are listed at www.tricare.mil/contactus.

TRICARE Pharmacy Benefits There's an App for That

FALLS CHURCH, Va. -- TRICARE and Express Scripts, Inc. (ESI) are pleased to announce the launch of the TRICARE Express Rx mobile app and mobile-optimized website.

These tools allow TRICARE beneficiaries to manage their prescriptions and access important health information safely and securely from anywhere using their smart phone.

The Express Rx app and mobile-optimized website will allow beneficiaries to register for TRICARE pharmacy home delivery and switch current prescriptions over to home delivery. Beneficiaries can also order home delivery refills and check order status. Another feature allows beneficiaries to look up information on their current prescriptions. On GPS-enabled smart phones, the app can direct beneficiaries to the closest retail pharmacy in their network.

"Improving convenience for our beneficiaries and broadening access to necessary services like prescription information is a key focus for TRICARE," said Rear Adm. Thomas J. McGinnis, chief of TRICARE Pharmacy Operations. "Express Rx is yet another way for beneficiaries to use their benefit wisely and conveniently, anytime and anywhere."

To ensure security and data protection, beneficiaries must register through the member portal at www.express-scripts.com/TRICARE before logging in to the Express Rx app or mobile-optimized site. Once registered, the same username and password allow access to the Express Rx app and mobile-optimized website.

Continued on page 7

How TRICARE Works with Other Health Insurance

By Sharon Foster
TRICARE Management Activity

The coordination of benefits between TRICARE and other health insurance (OHI) can be confusing.

If a beneficiary has health care coverage through an employer, public or private insurance program, including government programs such as Medicare, he or she is considered to have OHI. Even health care through an automobile insurance plan is considered OHI when services are related to an auto accident.

If a beneficiary has OHI, he or she should tell his or her provider and regional health

care contractor. Beneficiaries should also fill out the OHI form located on their regional health care contractor's website (www.tricare.mil/contactus). Keeping the regional health care contractor informed about the OHI will allow TRICARE to better coordinate benefits and will help ensure that there is no delay in payment of claims.

TRICARE is the secondary payer when a beneficiary has OHI. Before TRICARE considers the claim, the beneficiary's OHI must pay first. The exceptions are Medicaid and TRICARE supplemental plans. Please go to TRICARE's website to learn more www.tricare.mil/mybenefit/home/Medic

al/OHI.

After the other insurer pays, TRICARE will pay what is left up to the TRICARE allowable charge, which is the maximum amount TRICARE will authorize for medical and other services furnished in an inpatient or outpatient setting. There is no change in benefit limits when TRICARE is the secondary payer.

Beneficiaries need to be sure to submit all claims to TRICARE because deductibles may be applied to their annual catastrophic cap. The beneficiary's provider may submit secondary claims as well.

To reduce pharmacy costs, a beneficiary's best option is to

use a TRICARE retail network pharmacy that is also covered by their OHI. After the OHI pays, TRICARE may reimburse the beneficiary for part or all of their out-of-pocket costs, including copayments. Beneficiaries are not eligible to fill prescriptions via home delivery if they have OHI with a prescription plan, including a Medicare Part D prescription program, unless they meet one of the following requirements

- * The medication they need is not covered by their OHI.

- * They have met their OHI's benefit cap.

If the OHI provides only medical coverage, not pharmacy coverage, he or she still may be eligible to use home delivery (www.tricare.mil/homedelivery) as their prescription benefit.

Drowning...

Continued from page 3

around your pool. It should have self-closing and self-latching gates.

4. Always wear life jackets. Even if your kids know how to swim, they should always wear life jackets around natural bodies of water, such as the ocean or lake. For younger or inexperienced swimmers, they should wear life jackets around all water, even pools.

5. Make sure everyone in your home knows how to swim. Enroll them in age-appropriate swim courses. And if you still need to learn, sign up for classes immediately.

6. Have lifesaving equipment available nearby. This includes reaching or throwing equipment (such as a lifesaver and rope), a cell phone, lifejackets and a first aid kit.

For more important water safety tips, visit www.triwest.com/water-safety.

Africanized honey bees...

Continued from page 2

Check your house and yard at least once a month to see if there are any signs of bees taking up residence. If you do find a swarm or colony, leave it be and keep family and pets away. Find a local beekeeper to remove the colony or as a last resort call a pest control company to solve the problem. To help prevent honey bees from building a colony in your house or yard, fill all cracks and crevices in walls with steel wool and caulk. Remove piles of refuse,

honey bees will nest in an old soda can or an overturned flower pot as well as in cracks and crevices.

Obviously, it is best to avoid contact with Africanized Honey Bees in the first place but if contact becomes unavoidable, it is important to know what to do.

The most dangerous stings are on the head and face. Use a towel, jacket, blanket, anything to prevent stings

The best method of escaping a bee attack is to cover your head

and run for shelter.

Do not jump into water... bees will wait for you to come up for air. Once you are away from the bees, evaluate the situation. If you are allergic to bees, seek medical attention immediately. If you see someone else being stung or think others are in danger, call 911 immediately. Remove stingers as soon as possible to lessen the amount of venom entering the body. Scrape stingers off the skin with a blunt instrument or plastic card.

TRICARE Pharmacy...

Continued from page 6

ESI is the TRICARE Pharmacy contractor.

Smartphone users can download the app for free by going to www.express-scripts.com/mobile or by using services like the Apple App Store or Android Marketplace. The mobile-optimized pharmacy website can be accessed at <http://m.esrx.com>. TRICARE beneficiaries in the South Region can also make use of the mobile Humana Military website, <https://m.humana-military.com/>.

For more information about TRICARE pharmacy, visit www.tricare.mil/pharmacy. To learn about the TRICARE pharmacy home delivery, go to www.tricare.mil/homedelivery.

Introducing Captain Cynthia Gantt...

Continued from page 1

“Probably one of the highlights of my career was the work I did while stationed at the Pentagon working for the former Secretary of Defense Gates on his senior oversight committee on the care and case management of wounded warriors from 2006 to 2008.” According to the AHA citation for her 2010 award, “She (Gantt) produced landmark case management policy, information sharing, and data capture strategies that resulted in new abilities to track, analyze and evaluate case management services, including new workload modeling capabilities for all types of case management patients.”

En route to Twentynine Palms, Gantt was surprised with an award from The American Academy of Nurse Practitioners U.S. Pacific Territory Region as the 2011 AANP Nurse Practitioner State Award for Excellence. The award stated in part, “In recognition of contributions to improve the health care delivery in Guam through exemplary vision, transformative leadership application of research and excellence in advanced practice nursing. Gantt stated that this award is very dear to her because her heart is in patient care as a Nurse Practitioner.

Gantt wants to make it clear that she is eternally grateful for the inspiration and opportunities that she has received from her family, the United States Navy, military leaders and the mentors that she has learned from over the years. “I started at a community college, now I’m sitting here as the XO with a PhD., I’ve told folks more than once,

if I can do it, you can do it,” said Gantt. “Truly the value of an education, no matter how long they are in the Navy, whether they become a Master Chief Petty Officer, or if they are interest in becoming an officer, is very valuable,” said Gantt.

“I feel that the most important advice that I have for anyone here, especially the enlisted staff is for them to work with their chain of command and in particular with the Chief’s Mess,” said Gantt.

“I also would tell everyone that an education is an absolutely valuable thing to have...and education is a life-long process,” said Gantt.

“I believe in positive leadership, I believe in trust... I trust the folks that I lead and I want to be trusted by them. I firmly believe that leaders should be mentors and particularly that a mentor or a leader is generous with their knowledge, and as much as possible, and with their time,” said Gantt.

“If I had just a couple of words to describe what my leadership philosophy is it would be positive collaboration... everything can be rolled up into those two words. Trust is fundamental to collaboration,” said Gantt.

Gantt’s family is very important to her. The Gantts are the proud parents of an older son, Justin, who lives just outside of Phoenix, Arizona and is the parent of the XO’s two young granddaughters. The Gantts also have two daughters, Jessica who just turned 12 and will be going into the seventh grade at Twentynine Palms Junior High, and Melissa who also just had a birthday and is now 10, who

will be going into the fifth grade at Twentynine Palms Elementary. “My husband, I’m proud to report, is right now a full-time stay at home parent. He is a retired Medical Service Corps Officer -- Health Care Administrator. He was first a United States Navy Hospital Corpsman. He got out of the Navy then came back in as an active duty Medical Service Corps Officer and then he went into the reserve component where he retired as a commander on the 31st of July 2009. Then on the 1st of August 2009 I was promoted to Captain, so it was a very special time for us,” said Gantt.

“Our daughters have a lot of interests, right now they are in the bowling camp on base. They are also competitive swimmers and are fine musicians. We plan on getting involved in local youth sports like swimming and we also plan on getting involved in Girl Scouts. In Guam, my husband and I held leadership roles in Guam Girl Scouts. And when the weather gets cooler we hope to be able to explore the Joshua Tree National Park. Our daughter Jessica wants to get into rock climbing. Now that we are back on the mainland we will have an opportunity to take some road trips and drive faster than 35mph! We will be able to reconnect with my family here. It’s great to be home in California after six years,” said Gantt.

“My goals for this command are to be the best possible Executive Officer that I can, and to continue learning.”

On Vacation with TRICARE: Urgent or Emergency Care?

By Sharon Foster
TRICARE Management Activity

Two days into summer vacation, a beneficiary sprains his ankle while jet skiing. Even the best planned vacations can be disrupted with injury or sickness.

While TRICARE follows beneficiaries when they travel, understanding when something constitutes an emergency room or urgent care visit can help the beneficiary save money and time.

TRICARE defines an emergency as a medical, maternity or psychiatric condition that would lead a 'prudent layperson' (someone with an average knowledge of health and medicine) to believe that a serious medical condition exists; that the absence of immediate medical attention would result in a threat to life, limb or sight; when a person has severe, painful symptoms requiring immediate attention to relieve suffering or when a person is at immediate risk to self or others.

"Some examples of emergency situations may include: head injuries, broken bones, chest pains and the inability to breathe," said Kathleen Larkin, director, Health Plan Policy Division of Health Affair/TRICARE Management Activity. "If you or a family member

requires emergency care while on vacation, call 911 immediately or go to the nearest ER. If you are admitted, you must notify your primary care manager (PCM) or regional health care contractor within 24 hours or on the next business day to coordinate ongoing care."

Authorization is not required for emergency care before receiving treatment.

If a beneficiary is vacationing overseas with family, they can get assistance with locating an emergency facility or emergency number for the country they are visiting by calling the TRICARE Overseas Program (TOP) contractor. This contact information can be located at www.tricare.mil/contactus.

When seeking care from a host nation (overseas) provider, beneficiaries should be prepared to pay up front for services and then file a claim with the appropriate claims processor. Active duty service members (ADSMs) and Prime enrolled active duty family members should contact the TOP regional call center in the area prior to seeking care when possible or prior to making payment.

"TRICARE defines urgent care as a medical service needed within 24 hours when an illness or injury would not result in further disability or death if not treated immediately," said Larkin. "Some examples of

urgent care situations may include: earache, toothache, sprain or urinary tract infection."

If urgent care treatment cannot wait until the beneficiary returns home to see a PCM, he or she must contact their PCM for a referral or call their regional health care contractor for assistance before receiving care. Failure to obtain a referral may cause care to be covered under the point-of-service (POS) option and will incur higher costs. The POS option does not apply to ADSMs, newborn or

adopted children in their first 60 days, emergency care or if the beneficiary has other health insurance. Beneficiaries can visit www.tricare.mil/cost for POS details.

ADSMs should seek urgent care at a military treatment facility (MTF). If away from home, ADSMs should contact their regional health care contractor for assistance in obtaining urgent care. ADSMs living overseas who are unable to seek urgent care at an MTF should contact the TOP regional call center.

Beneficiaries may use any TRICARE pharmacy option when vacationing, but should be sure their DEERS information is current. At overseas host nation pharmacies, beneficiaries will pay up front and file for reimbursement of covered charges with the overseas claims processor.

If beneficiaries require emergency dental care, they can contact the dental care program they are enrolled in for further assistance.

TRICARE Tips to Avoid Bug Bites and Stings this Summer

By Sharon Foster
TRICARE Management Activity

Community barbeques, family camping trips and state fairs -- Ah, summer is finally here. However, without proper precautions, bees, mosquitoes, fire ants and ticks can turn a fun outing into a miserable day of itching and scratching.

Dealing with biting and stinging insects during the summer is no laughing matter and can be down-right annoying, even dangerous. With the best bug repellents in use, a few lucky bugs are bound to get through any barrier and leave itchy bites and stings.

"Taking proper precautions to protect yourself and your family against insect bites, not only will make your outings more enjoyable, but can also protect you from a number of diseases carried by insects, such as West Nile virus and Lyme disease," said U.S. Public Health Service Cmdr. Aileen Buckler, TRICARE population health physician.

What can TRICARE beneficiaries do to keep insects away? The Department of Health and Human Services (HHS) list several suggestions:

- * Use an EPA-registered insect repellent (such as DEET) and wear protective clothing when outdoors from dusk to dawn -- peak biting times for many

insects

- * Don't wear heavily scented soaps, perfumes or bright colors which attract bugs

- * Don't leave drinks and garbage cans uncovered; get rid of containers with standing water that attract mosquitoes

- * After outdoor activities, beneficiaries should check themselves, family members and pets for ticks.

While bug bites and stings usually are just nuisances that can be treated with over-the-counter oral and topical antihistamines, others can transmit disease or cause serious reactions. Beneficiaries should seek immediate medical attention if they experience the following:

Signs of allergic reaction: Some people are allergic to insect bites or stings and can experience anaphylaxis, a severe, life-threatening allergic reaction. Signs of an allergic reaction, which may occur within seconds to minutes, include: sneezing, wheezing, hives, vomiting, diarrhea, sudden anxiety, difficulty breathing, chest tightness and itching or swelling of the eyes, lips, or other areas of the face.

Signs of infection: It is normal for a bite or sting to result in redness of the affected area and minor swelling. Sometimes, however, a bite or sting becomes infected and a fever may develop or the redness or soreness may worsen.

TRICARE beneficiaries who take protective precautions can enjoy all the outdoor activities that come with summer.